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"Nonaversive" Behavior Management: A Misnomer

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The use of punishment as a means to effect behavior change has a long and controversial history. Even when used systematically and judiciously to weaken aberrant behavior, the use of punishment engenders more misunderstanding and debate than any other form of behavior therapy. Recently, there has been a movement by some persons working in human services, especially developmental disabilities, towards what is generally referred to as "nonaversive" behavior management (e.g., Horner et al., 1990; LaVigna & Donnellan, 1986). One major problem with using the term "nonaversive" as a descriptor of this approach is that it is often used in a manner inconsistent with conventional behavior analytic usage (see Wolery & Gast, 1990, for a discussion of additional problems with using the term). The purpose of this paper is not to debate the merits of the "nonaversive" position; indeed, proponents of this approach have made many valuable contributions to the treatment of individuals with challenging behavior problems. Rather, this paper argues that current use of the expression "nonaversive" in this context is often technically incorrect and misleading, and may have negative consequences for both the field of behavior analysis and its consumers.

Ever since the founding of their science, behavior analysts have emphasized the need for objective, empirical specification of their subject matter. Definitions that stress functional relations between the environment and behavior are the most commonly accepted in the field today (e.g., Axelrod & Apsche, 1983; Azrin & Holz, 1966; Catania, 1984; Johnston, 1972; Matson & DiLorenzo, 1984; Morse & Kelleher, 1977; O'Brien, 1989). For example, in discussing aversive control, Hutchinson (1977) stated that:

> Aversiveness is assessed by the capacity of a stimulus to support responses which eliminate or reduce such stimulation, or alternatively by its capacity to suppress performances maintained by other stimuli. Thus aversive stimuli are often referred to as negative reinforcers and punishers. (p. 415)

Nowhere within this definition are references made, either explicitly or implicitly, to subjective feelings of pain or discomfort, tissue damage, harm, social acceptability, or the potential for negative side effects or misuse. Any stimulus change, *regardless of its form,* that weakens the behavior it follows or whose termination, reduction, or postponement maintains responding is, by definition, an aversive stimulus. This may include contingent electrical stimulation, noxious tastes and odors, time out, overcorrection, or reprimands if it has one of the above effects on behavior. Similarly, food or affection is aversive if any of the above conditions obtain. Conversely, if the contingent presentation of a stimulus does not weaken behavior or if its withdrawal does not strengthen or maintain behavior, the stimulus is not functionally aversive, irrespective of its physical characteristics. Moreoever, for a given individual a particular stimulus change may be aversive at one point in time but positively reinforcing at a different time. For example, under certain conditions a person may respond to escape a fan blowing cool air (e.g., by turning off the fan or leaving the room in which the fan is located) but at another time may respond to contact the cool air (e.g., by turning on the fan or entering the room).

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Many persons who align themselves with the so-called nonaversive position acknowledge functional definitions of punishment and negative reinforcement. Despite this, they frequently continue to use the terms "aversive" and "nonaversive" nonfunctionally in their professional activities. This is an inconsistency that may have deleterious results for the science and its consumers (see below).

Others eschew functional definitions of consequences entirely in favor of social or topographical definitions. A social or topographical definition is:

> based on the physical characteristics of the stimulus and suggests that particular stimuli are aversive because they appear to inflict pain, cause discomfort, or are viewed as unpleasant. This designation is made separate from a demonstration that a relationship exists between the individual's behavior and the contingent presentation or withdrawal of the stimulus. (Wolery & Gast, 1990, p. 130)

Social definitions of aversiveness are vague and subjective and have no place in a science of behavior. Emphasis upon objective description of its subject matter is what distinguishes the science of behavior from prescientific and nonscientific conceptions of behavior.

From a functional perspective it is clear that few, if any, attempts to modify behavior are truly nonaversive. Brief periods of time out, response cost, and reprimands have been used by at least some persons advocating the nonaversive position. More common training procedures such as making requests to perform new behaviors, prompting, and redirection may also be functionally aversive (e.g., Horner et al., 1990). That the use of some forms of aversive stimuli are justifiable seems not to be in dispute. What is questioned are the methods employed to bring about behavior change. Or, as Horner et al. (1990) stated:

> non-aversive behavior management, however, has developed less as a response to mild, or potentially mild, forms of aversive stimuli, than as an alternative to the use of more extreme aversive events. The ideological use of "aversive" has become synonymous with procedures that involve the delivery of pain, the withholding of basic human needs, or social humiliation. From an ethical perspective these procedures are viewed as too extreme to be accepted as "treatment." (p. 126)

Few would argue that any effort to minimize the use of procedures that are painful or otherwise unpleasant is commendable and ethically mandatory. However, to take the philosophical position that certain events are considered aversive because they are subjectively unpleasant, whereas, other—presumably less unpleasant—events are considered nonaversive, neglects the functional perspective that has been, until recently, deeply ingrained in behavior analytic theory.

Some may contend that we should use "aversive" and "nonaversive" technically for behavioral audiences and more commonsensically for non-behavioral audiences. This is a mistake. Irrespective of the audience, failure to remain conceptually consistent may be misleading and damaging in several respects. First, the term "nonaversive" behavior management implies the existence of a "proaversive" behavior management whose emphasis revolves primarily around aversive control. Few behavior analysts would take such a stance which conflicts directly with moral, ethical, and legal obligations. Second, as discussed above, few approaches to behavior change are functionally nonaversive. It is misleading to potential consumers to indicate otherwise. Relatedly, social definitions of aversiveness are idiosyncratic. There may be large discrepancies between consumers and practitioners, as to what is considered aversive. For example, from a social perspective some persons may view spanking one's child as socially acceptable, and hence nonaversive, whereas others may abhor such practices and consider spanking highly aversive. If the wrong idea of aversiveness is conveyed to parents, advocates, the press, legislators, and the like, we may experience decreased support for research on aversive control or legislation aimed at proscribing forms of aversive stimuli that are distasteful to those empowered to make such decisions. Finally, inconsistent use of "nonaversive" may be contributing to a polarization of the behavioral community. Those who believe that our terms should carry only

their technical meanings may dismiss, out of hand, work by others who use the terms socially. One unfortunate effect of this is that, "like religious adherents, we begin to associate only with other adherents or to read or publish only that which supports our myths" (Donnellan & LaVigna, 1990, p. 50). This situation is very unfortunate because their similarities far outweigh their differences and both have much to offer in the treatment of persons with significant behavior disorders.

When discussing material as controversial and misunderstood as aversive control, it is especially important to be unambiguous and forthright. Although this is sometimes difficult and laborious for both the speaker and the listener, it is a necessary step in clearly articulating the subject matter and avoiding misunderstanding. Other sciences have adopted this position. From quantum physics to quasars, science authors have increasingly written for the lay populace while retaining the integrity of their subject matter (e.g., Casti, 1989; Dawkins, 1986; Gould, 1989; Gribbon, 1984, 1986, 1987; Penrose, 1989; Sagan, 1985; Weinberg, 1988). Gould (1989) argued strongly from this position:

> The concepts of science, in all their richness and ambiguity, can be presented without any compromise, without any simplification counting as distortion, in language accessible to all intelligent people. Words, of course, must be varied, if only to eliminate a jargon and phraseology that would mystify anyone outside the priesthood, but conceptual depth should not vary at all between professional publication and general exposition. (p. 16)

The science of behavior should be no different. Irrespective of the audience or the terminology employed, we must remain true to the empirical and objective foundations upon which our science was built. We have nothing to gain by subjectivization of our subject matter and we have, perhaps, a great deal to lose.

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